PATENT APPLICATION SEE DETERMINATION DECC								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								1000 7136					
		CLAIMS AS	S FILED - (Column	1.61	(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			56				R/	TE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			∑ minus 20=		•		XS	9=		OR			
INDEPENDENT CLAIMS			3 minus 3 =		*		X42=			OR	X84=		
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT			+14		40=		OR			
* If	the difference	in column 1 is	less than z	ero, ente	r "0" in d	n column 2		TAL	<del> </del>		TOTAL		
CLAIMS AS AMENDED - PART II								IAL		OR	OTHER	THAN	
-		S(Column 1)		(Colu		(Column 3)	SM	ALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.56	Minus	<b>*</b> 5	6	<u>)</u>	X\$	9=		OR	X\$18=		
	Independent	• 3	Minus	*** 3	3		X4	2=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DE			PENDENT	CLAIM		+14				+280=		
								OTAL		OR	TOTAL		
										OR	ADDIT. FEE		
		(Column 1) CLAIMS		(Colui		(Column 3)	_		ADDI			4001	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4	2=		OR	X84=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		+14	0=		OR	+280=	_	
								OTAL		OŘ	TOTAL		
	(Column 1) (Column 2) (Column 3)							FEE	<u> </u>		ADDIT. FEE <b>l</b> 1.		
AMENDMENT C		CLAIMS REMAINING		HIGH	EST				ADDI-			ADDI-	
		AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	-	
	Independent	•	Minus	***		<b>=</b> -	X4:	2=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ÓR			
+140=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **OTAL ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	L	
		nber Previously Pa					found in 1	he ap	propriate box	in co	lumn 1.		

FORM PTO-875 (Rev. 8/01)